

EXHIBIT 2 – Federal EERA, Form OF-294  
**EMERGENCY EQUIPMENT RENTAL AGREEMENT**

1. ORDERING OFFICE <i>(name and address)</i>		<b>AGREEMENT NUMBER MUST APPEAR ON ALL PAPERS RELATING TO THIS AGREEMENT</b>							
		2. AGREEMENT NUMBER							
4. CONTRACTOR a. name and address		3. EFFECTIVE DATES a. beginning		b. ending					
		5. POINT OF HIRE <i>(location when hired)</i>							
b. EIN/SSN:		6. THE WORK RATE IS BASED ON ALL OPERATING SUPPLIES BEING FURNISHED BY							
		<input type="checkbox"/> CONTRACTOR <input type="checkbox"/> GOVERNMENT							
c. telephone number (day)	d. telephone number (night)	7. OPERATOR FURNISHED BY  <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> GOVERNMENT							
8. TYPE OF CONTRACTOR <i>("X" appropriate boxes)</i> <input type="checkbox"/> SMALL BUSINESS <input type="checkbox"/> LARGE BUSINESS <input type="checkbox"/> VALL DISADVANTAGED OWNED <input type="checkbox"/> MEN OWNED <input type="checkbox"/> LABOR SURPLUS AREA <input type="checkbox"/> GOVERNMENT EMPLOYEE									
9. ITEM DESCRIPTION <i>(include make, model, year, serial number and accessories)</i>		10. NUMBER OF OPERATORS		11. WORK OR DAILY		12. SPECIAL		13. GUARANTEE <i>(8 or more hours)</i>	
				a. rate	b. unit	a. rate	b. unit		
a.									
b.									
c.									
d.									
e.									
f.									
g.									
14. SPECIAL PROVISIONS									
15. CONTRACTOR OR AUTHORIZED AGENT'S SIGNATURE				16. DATE		17. CONTRACTING OFFICER'S SIGNATURE			18. DATE
19. PRINT NAME AND TITLE					20. PRINT NAME AND TITLE				

